

**PAID FEEDING ASSISTANTS IN LONG-TERM CARE FACILITIES
MISSISSIPPI POLICY
versus
CMS FINAL RULE - 42 CFR Parts 483 and 488**

FEEDING ASSISTANT CMS FINAL RULE	FEEDING ASSISTANT MISSISSIPPI POLICY
<p><u>General Comments</u></p> <p>The CMS final rule permits a long term care facility to use paid feeding assistants to supplement the services of certified nurse aides under certain conditions.</p> <p>States may choose to implement a feeding assistant training program if it is consistent with State law.</p> <p>States do not have to implement an approval program. If States do not implement an approval program, the result is that facilities in that State will not be able to hire any paid feeding assistants.</p> <p>If implementing a feeding assistant training program, States must approve training programs for feeding assistants using Federal requirements as minimum standards.</p> <p><u>Feeding assistants must successfully complete a State-approved training program that meets Federal requirements, work under the supervision of a registered nurse or licensed practical nurse, and must do so before feeding residents.</u> The intent is to provide more residents with help in eating and drinking and reduce the incidence of unplanned weight loss and dehydration.</p> <p>CMS believes that there is a place in nursing homes for the use of feeding assistants, who after proper basic training in feeding techniques and working with the elderly, are able to feed residents who do not have complicated feeding problems.</p> <p>CMS does not consider the kinds of tasks facilities will be asking feeding assistants to provide as either nursing or nursing related.</p> <p>Effective date of the rule if October 27, 2003.</p>	<p><u>General Comments</u></p> <p>There are no known legal barriers in Mississippi that would prevent the State Agency from choosing to implement a feeding assistant training program.</p> <p>The State Agency will implement an approval program for feeding assistants using Federal requirements as minimum standards. This will allow facilities in Mississippi the option to use paid feeding assistants to supplement the services of certified nurse aide to help residents with eating and drinking.</p> <p><u>Feeding Assistants must successfully complete a State-Approved training program that meets Federal requirements prior to performing feeding assistant tasks, and work under the supervision of a registered nurse or licensed practical nurse.</u></p> <p>Although the effective date of the final rule is October 27, 2003, the approval date for facilities will be based upon the date that the State Agency determines that the facility has met the requirements for approval. Once all documentation required by the State Agency has been received, reviewed, and approved, the facility will be notified in writing of the facility's effective approval date.</p>

Definition of Paid Feeding Assistant

Paid feeding assistant means an individual who meets the requirements specified in Section 483.35(h)(2) of the final rule, and who is paid to feed residents by a facility, or who is used under an arrangement with another agency or organization.

Paid feeding assistants can only feed residents who do not have complicated feeding problems that would require the training of a nurse or nurse aide. Paid feeding assistants must not feed any residents with complicated feeding problems or perform any other nursing or nursing-related tasks.

Nurses or nurse aides will continue to feed residents with complicated feeding problems who require the assistance of staff with more specialized training.

CMS now no longer considers the duties of a feeding assistant or transporting (not transferring) a resident a nursing-related task. Transferring and positioning does require the services of a nurse or a nurse aide who has completed the nurse aide training and competency evaluation program.

CMS prohibits counting paid feeding assistants toward minimum staff requirements.

CMS does not limit States to use the term “Feeding Assistant”. The term “feeding assistant” was widely used by states and organizations before the proposed rule and the term was not changed. Other terms suggested include the following: meal assistant; food & hydration aide or assistant; nourishment aide; nutrition assistant; nutritional aide; nutrition-hydration assistant; dining assistant; and resident assistant. Facilities and states may use whatever term they prefer.

Definition of Paid Feeding Assistant

The State Agency requires that the term “Feeding Assistant” be used since it is the term used in the regulations.

Paid feeding assistants must not feed any residents with complicated feeding problems or perform any other nursing or nursing-related tasks.

The State Agency believes that residents in isolation should be fed by nurse aides and/or nurses; therefore, feeding assistants are prohibited from feeding residents in isolation.

<p><u>Who Can Be A Feeding Assistant</u></p> <p>Any individual can act as a feeding assistant if he or she meets the training and supervision requirements. Facilities may use existing staff and/or hire additional staff to assist at mealtimes. Each facility's administrator is responsible for allocating available staff to perform necessary tasks and the decision is left to the administrator to decide whether to use as feeding assistants staff who are not health care personnel. Existing Staff might include the administrator, activity staff, clerical, laundry, housekeeping staff, or others who see residents on a daily basis.</p>	<p><u>Who Can Be A Feeding Assistant</u></p> <p>Same</p>
<p><u>Use of Volunteers & Family Members</u></p> <p>The final rule exempts volunteers and family members from the training requirements.</p> <p>CMS does allow voluntary training and encourages volunteers and family members to take the training for feeding assistants.</p> <p>Each facility must determine whether or not to require volunteers and family members to complete feeding assistance training.</p> <p>Ultimately, facilities are responsible for the care and safety of residents, even if the resident is fed by a relative or friend.</p>	<p><u>Use of Volunteers & Family Members</u></p> <p>The final rule exempts volunteers and family members from the training requirements.</p> <p>CMS does allow voluntary training and does encourage volunteers and family members to take the training for feeding assistants.</p> <p>Each facility must determine whether or not to require volunteers and family members to complete feeding assistance training.</p> <p>Private duty aides and students in nursing education programs and other allied health type programs who use facilities as clinical practice sites are considered volunteers.</p> <p>Facilities are responsible for the care and safety of residents, even if the resident is fed by a relative, friend, or volunteer.</p>
<p><u>Revised Definition for Nurse Aide</u></p> <p>Nurse aide means any individual providing nursing or nursing-related services to residents in a facility who is not a licensed health professional, a registered dietitian, or someone who volunteers to provide such services without pay. Nurse aides do not include those individuals who furnish services to residents only as paid feeding assistants as defined in Section 488.301.</p>	<p><u>Revised Definition for Nurse Aide</u></p> <p>Same</p>

Feeding Assistant Training Requirements

Section 483.160 provides the requirements for training paid feeding assistants and include only services that are non-nursing related.

Paid feeding assistants are required to successfully complete a State-approved training course which includes the following minimum Federal requirements :

Course Hours - A minimum of 8 hours of training.

Course Content/Topics -

- 0 Feeding Techniques
- 0 Assistance with feeding & hydration
- 0 Communication and interpersonal skills
- 0 Appropriate responses to resident behavior
- 0 Safety & emergency procedures, including the Heimlich maneuver
- 0 Infection control
- 0 Resident rights
- 0 Recognizing changes in residents that are inconsistent with the norm and the importance of reporting changes to the nurse.

Instruction Qualifications - The final rule defers to States the decision as to which individuals would be qualified to teach the feeding assistant training (i.e., Registered Nurses/RNs, Licensed Practical Nurses/LPNs, Registered Dietitians/RDs, etc.). A trained feeding assistant cannot train another.

Identification of Feeding Assistant - With regard to name tags, CMS thinks it is a good idea but did not make it a requirement. The decision for a facility to require feeding assistants to wear name tags has been left to each facility.

Competency - There is no Federal requirement for a competency test in the final rule. The instructor or supervisory nurse will assess the competency of trained feeding assistants.

CMS has given States and facilities the flexibility/freedom to add to the minimum training requirements.

Feeding Assistant Training Requirements

The State Agency has determined that the Federal minimum requirement of 8 hours of training is not sufficient to properly train feeding assistants to feed residents; therefore, the minimum number of hours of training required by the State Agency is sixteen (16). This increase in hours would provide training time for additional subjects required by the State; time for observation of other staff members (or other feeding assistants after successful completion of training) feeding residents; and time for demonstration of several tasks by the feeding assistant student in a lab and/or clinical setting as deemed appropriate by the facility in determining the competency of the feeding assistant.

The State Agency program requirements meet minimum Federal requirements. In addition to the minimum Federal requirements, the State Agency requires that the following topics be included in the training program:

- Role (Definition) and responsibilities of the Feeding Assistant
(Emphasis on performing only feeding tasks for which training has been provided and being able to state that he or she is not allowed to feed residents with complicated feeding problems).
- Supervision and who feeding assistants will call in case of an emergency.
- How and from whom feeding assistants will receive their resident assignments.
- Facility policies and procedures on determining % of Intake (liquids and food) and method of reporting or recording resident intake.
- Specialized feeding & intake problems associated with residents with dementia and with Alzheimer's disease.
- Proper procedures for serving fresh water , ice, beverages and snacks from hydration cart.
(e.g. avoid contamination of ice by using and storing ice scoop properly, by not allowing ice to touch hand and fall back into container, by placing scoop in appropriate receptacle after each use, etc.).

	<p>-Instruction on before meal/after meal nursing-related tasks to be completed by CNA (e.g., mouth care, toileting, washing resident's face and hands before and after meals, making sure dentures are in properly, positioning resident properly, placement, removal and/or replacement of lap buddy, rolling wheel chair up to table and locking wheelchair, etc.).</p> <p>-Instruction on the Mississippi Vulnerable Adults Act and signing of statement acknowledging understanding of the Act (see Section 43-47-1, et seq. Mississippi Code of 1972, as amended).</p> <p>Minimum Federal course requirements are listed below and include only services that are non-nursing related. Facilities may require additional subjects or hours of training; however, feeding assistants may not perform any duties beyond those associated with the regulations.</p> <p><u>Communication and Interpersonal Skills and Appropriate Responses to Resident Behavior</u></p> <p>-Good communication skills - verbal - words (e.g., speak clearly & use short words/ sentences); nonverbal (e.g., body language - facial expression, gestures, tone of voice, posture, eye contact, silence, touch, etc.); be a good listener (listen for facts and feelings); interact on one-to-one basis with resident; overcoming physical barriers/communicating with special needs residents (e.g., visually impaired residents, hearing impaired, cognitively impaired; residents who have loss the ability to speak or understand words); ways to build a good/friendly relationship; introduce self; make feeding a social event; controlling your negative feelings - recognizing a resident's cultural, social, ethnic, or religious background; and dealing with difficult behavior, etc.</p> <p>Communication with the dementia resident and dealing with behavioral disturbances.</p>
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	<p><u>Residents Rights</u></p> <p>Must be knowledgeable of residents rights and be able to give examples of promoting residents rights during meals while feeding or assisting a resident with eating (e.g., promoting resident's dignity; allowing residents to make personal choices; right to eat or not eat; stop feeding resident when verbally or non-verbally (hand gesture or turning head); order of food; alternative menu; right to have visitors eat with them; right to sit where they want to sit, etc.).</p> <p>Right of the resident to be cared for in a manner free from abuse, neglect, or misappropriation of resident's property.</p> <p><u>Safety & Emergency Procedures, including the Heimlich maneuver</u></p> <p>Must be able to identify signs and symptoms of choking.</p> <p>Must be able to demonstrate the Heimlich Maneuver.</p> <p>Check temperature of food to make sure it's not too hot.</p> <p>Discuss swallowing problems and foods that are hard to swallow.</p> <p>Must understand importance of reporting any feeding concerns to the charge nurse.</p> <p>What to do in case of fire.</p> <p><u>Infection Control</u></p> <p>Basics on how germs are spread.</p> <p>Why residents are at high risk for infections.</p> <p>When hands must be washed.</p> <p>Instructions on basic infection control principles and proper hand washing techniques during meal service and feeding of a resident.</p> <p>Don't mix clean & dirty trays.</p> <p>Must be able to demonstrate proper hand washing techniques.</p>
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Feeding Techniques

Must be able to demonstrate proper feeding techniques (e.g., wash hands - self; identify self to resident; address resident by name & with respect & dignity; make sure environment is neat, clean and free from unpleasant odors; make sure resident is comfortable - in proper upright feeding position - if not, request nursing personnel to correct; offers and/or assist with placement or removal of clothing protector versus bibs to protect resident's dignity; check resident's identification bracelet with dietary card or request nursing personnel to verify resident's name to ensure resident is getting tray prepared for him/her; make sure resident has all utensils and straw for liquid; make sure hot food is hot & cold food is cold; do not rush resident - feed slowly; prepare food for serving - cut up meat and/or larger goods, open cartons, butter bread/toast, season food; sit next to resident in order to maintain eye contact and promote resident dignity; interact with resident in pleasant and appropriate manner - make meal social event; encourage independence - special adaptive utensils may be necessary; sit at eye level; feed small amounts of food; don't mix foods together unless resident ask you to, feed food in order of preference of resident ; offer fluids first to moisten mouth; feed foods in logical order and alternate between solids and liquids; make sure resident's mouth is empty before next bite of food or sip of beverage; allow adequate eating time to chew food thoroughly; encourage resident to eat as much as possible; test food for appropriate temperatures; identify or describe foods items for vision impaired resident, using clock-hours hand positions to describe where food is located on plate; note amount of food and liquids consumed and record; and observe and report swallowing difficulties, choking, coughing, chewing difficulties, changes in appetite or thirst to charge nurse, etc.; wipe food from resident's mouth and hands as necessary during and at the end of meal; note, report or record intake prior to removing food tray.

	<p>Must be knowledgeable of different diets and be able to identify (e.g., clear, full liquid, soft, mechanical soft - regular, regular with chopped meat, regular with NCS/no concentrated sweets, regular with NSP/no salt packet, and pureed).</p> <p>Feeding assistants are to know that dietary supplements are not snacks and residents should be encouraged to eat/drink the supplement. Supplements are available as drinks, puddings, granola bars, and “pudding pops”, etc. Except in rare cases, supplements do not replace the meal but are given in addition to it, often between meals.</p> <p><u>Assistance with feeding and hydration</u></p> <p>Adaptive self feeding devices (e.g., divided plate, scoop dish, fat handle spoon, cup with lid on it.)</p> <p>Make sure feeding assistant understands why many nursing home residents cannot feed themselves (frailty, mental impairment, swallowing difficulties, poor control of their hands and arms).</p> <p>Encourage resident to feed self as much as possible (progressive self feeding program).</p> <p><u>Existing Facility Staff Training</u></p> <p>Existing facility staff may be excluded from the following Feeding Assistant Training Program courses <u>provided</u> that documentation of prior related training is available:</p> <ul style="list-style-type: none"> -MS Vulnerable Adults Act. -Communication/interpersonal skills and appropriate responses to resident behavior. -Resident rights. -Infection control. -Safety & emergency procedures, including the Heimlich maneuver. <p>Existing facility staff with evidence of prior training in the above subjects may successfully complete the Feeding Assistant Training Program in less than 16 hours as verified by the instructor.</p>
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<p><u>Competency Evaluation</u></p> <p>There is no Federal requirement for a competency test in the final rule.</p>	<p><u>Competency Evaluation</u></p> <p>There is no Federal/State requirement for a competency test.</p> <p>However, facilities are encouraged to develop and administer some type of competency test for use in assessing the competency of the feeding assistant student. The test could include demonstration by the feeding assistant student of several tasks (e.g., a simulated demonstration of the Heimlich maneuver in a lab setting; return demonstration of safe and proper feeding of a regular and/or pureed diet to another student - acting as a dependent resident who cannot feed self - while promoting residents rights and infection control; demonstration of proper hand washing techniques, etc.).</p>
<p><u>Successful Program Completion</u></p> <p>A facility must not use any individual working in the facility as a paid feeding assistant unless that individual has successfully completed a State-approved training program for feeding assistants, as specified in Section 483.160.</p>	<p><u>Successful Program Completion</u></p> <p>“Successful Completion” is to be determined by the instructor or the supervisory nurse.</p>

<p><u>Feeding Assistant Training Program Approval Process</u></p> <p>No requirements established on how States are to approve feeding assistant programs, thereby giving each State the flexibility to decide what method makes the most sense in terms of use of its resources. The final rule offers several ways in which States may approach approval of training.</p> <p>(1) States may chose to develop a model training program that complies with Federal requirements and require that any facility that trains and uses feeding assistants uses that specific program.</p> <p>(2) States might choose to do a paper review of each facility's training program, or the State might insist on a site visit to review a facility's program.</p> <p>(3) States might initially deem each facility's training program approved and then review the program when the facility is next surveyed.</p>	<p><u>Feeding Assistant Training Program Approval Process</u></p> <p>The State Agency has chosen to initially approve feeding assistant training programs via a paper review and may conduct an onsite review of the Feeding Assistant Training Program (FATP) during any visit by the State Agency.</p> <p>The State Agency program requirements exceed minimum Federal requirements. Facilities must meet or exceed the State Agency requirements.</p> <p>Documents that facilities must submit to the State Agency for review for determining whether or the facility's feeding assistant training program will be approved are as follows:</p> <p>Outline of facility's feeding assistant course content/topics, indicating hours each topic will be taught.</p> <p>Names of Instructor(s) and Qualification Information</p> <p>Example of training certificate to be issued to feeding assistant upon successful completion of training.</p> <p>Upon review and approval of the facility's application for approval of a Feeding Assistant Training Program (FATP), the State Agency will date stamp the application "APPROVED" and return a copy to the facility for maintenance in the facility's FATP training records.</p> <p>Facilities are responsible for notifying State Agency of any changes to their program (e.g., course content, instructors, etc.).</p>
<p><u>Feeding Assistant Training Program (FATP) Renewal/Re-approval Process</u></p> <p>Not addressed by CMS.</p>	<p><u>Feeding Assistant Training Program (FATP) Renewal/Re-approval Process</u></p> <p>Oversight review may be conducted as deemed necessary. The State Agency may withdraw approval of a FATP if the facility fails to comply with State and/or Federal requirements.</p>

<p><u>Supervision</u></p> <p>A feeding assistant must work under the supervision of a registered nurse (RN) or licensed practical nurse (LPN)</p> <p>In an emergency, a feeding assistant must call a supervisory nurse for help on the resident call system.</p> <p>The word “direct” or “direct supervision” in the proposed rule was removed by CMS because they thought it might unintentionally imply visual contact between a feeding assistant and a supervisory nurse. CMS does not require that the supervisory nurse must be in the unit or on the floor where the feeding assistance is furnished.</p> <p>The facility is responsible for ensuring that it has sufficient supervisory nursing staff (Registered Nurses and Licensed Practical Nurses) available to adequately supervise feeding assistants without adding undue burden on the staff. When using feeding assistants, a facility must balance the increase in staff available to meet resident needs with the increased need to supervise the feeding assistants.</p> <p>The working hours for feeding assistants are not limited to mealtimes. Facilities may use feeding assistants at any time that the supervision requirements are met.</p>	<p><u>Supervision</u></p> <p>A feeding assistant must work under the supervision of a registered nurse (RN) or licensed practical nurse (LPN).</p> <p>Facilities must develop policies and procedures addressing supervision, how feeding assistants will receive resident assignments, and how feeding assistants will contact a nurse for help in case of an emergency.</p>
<p><u>Where May Feeding Assistants Feed Residents</u></p> <p>Feeding Assistants may feed residents in the dining room and may feed residents that are unable or unwilling to go to a congregated dining area in their own room if it is determined by the nurse in charge that it is safe for them to be fed in their own rooms.</p>	<p><u>Where May Feeding Assistants Feed Residents</u></p> <p>Same</p>

<p><u>Criteria for Selecting Residents to be Fed by Feeding Assistants</u></p> <p>A facility must ensure that a feeding assistant feeds only residents who have no complicated feeding problems. Residents who have a clinical condition would require the individual who is feeding to have received the training of a nurse or nurse aide.</p> <p>Complicated feeding problems include, but are not limited to, difficulty swallowing, recurrent lung aspirations, and tube or parenteral/IV feedings.</p> <p>The facility must base resident selection on the charge nurse's assessment and the resident's latest assessment and plan of care.</p>	<p><u>Criteria for Selecting Residents to be Fed by Feeding Assistants</u></p> <p>Same</p>
<p><u>Informed Consent From Resident</u></p> <p>Facilities are not required to obtain informed consent from the resident or resident's representative that the resident agrees to be fed by a feeding assistant and accepts the risks and benefits.</p>	<p><u>Informed Consent From Resident</u></p> <p>Same</p>
<p><u>Individualized Resident Feeding Plan</u></p> <p>An individualized feeding plan is not required by CMS since it would very likely duplicate part of the care planning process.</p>	<p><u>Individualized Resident Feeding Plan</u></p> <p>Same</p>
<p><u>Posting Numbers of Feeding Assistants Used by the Facility</u></p> <p>Paid feeding assistants do not qualify as licensed or unlicensed nursing staff; therefore, facilities do not need to post the numbers of feeding assistants used by the facility.</p>	<p><u>Posting Numbers of Feeding Assistants Used by the Facility</u></p> <p>Facilities are prohibited from counting paid feeding assistants toward minimum staff requirements.</p>

<p><u>Requirements for Maintenance/Retention of Feeding Assistant Records</u></p> <p>Facilities must maintain a record of all individuals, used by the facility as feeding assistants that have successfully completed the training course for paid feeding assistants.</p>	<p><u>Requirements for Maintenance/Retention of Feeding Assistant Records</u></p> <p>Facilities must maintain a record of all individuals used by the facility as feeding assistants that have successfully completed the training course for paid feeding assistants.</p> <p>Facilities are required to issue a Feeding Assistant Training Certificate to each individual that successfully completes the feeding assistant training program and keep a copy of the certificate on file. The certificate must (1) contain the name of the facility and location (city/state) conducting the training, (2) the name of the individual that completed the training, (3) a statement that the individual successfully completed a State-approved Feeding Assistant Program, (4) the date the training course was completed, and (5) signature of instructor.</p> <p>The facility is required to keep on file documentation of the training that was conducted, identification of the Instructor (e.g., name of RN, LPN, RD) that conducted the training.</p> <p>Facilities are required to keep on file a copy of the facility's Feeding Assistant Training Program (FATP) application, which has been stamped approved by the State Agency, a copy of their training session outline indicating the time (i.e., minutes and/or hours) allotted for each topic; copies of all examinations, checklists, and any other relevant training records.</p>
<p><u>Requirements for Reporting Misconduct</u></p> <p>Facilities must report to the State agency any incident of abuse, neglect or misappropriation of resident property by a paid feeding assistant and requires States to maintain records of all reported incidents.</p> <p>No requirements for States to establish procedures for review of allegations of abuse, neglect, and misappropriation of property, and for procedures for investigation of complaints because such requirements/provisions already exist.</p>	<p><u>Requirements for Reporting Misconduct</u></p> <p>Same</p>

<p><u>Federal Oversight - State Survey Process</u></p> <p>The survey process will provide the Federal oversight of facilities' use of feeding assistants, as it does for other participation requirements.</p> <p>During surveys of nursing homes, surveyors will observe the meal or snack service to note if any of the residents receiving feeding assistance are having trouble, such as coughing or choking. If this is observed, surveyors will investigate to determine if this is an unusual occurrence or a chronic problem and whether feeding assistants have successfully completed the 8-hour training course.</p> <p>Surveyors will also determine if the resident receiving the feeding assistance is one who has no complicated feeding problems. This will be done by a review of medical charts and discussion with the professional nursing staff. Similarly, surveyors will note concerns about supervision of paid feeding assistants and investigate how the facility provides supervision by interviewing staff during meal or snack times and drawing their own conclusions from observations.</p> <p>Deficiencies will be cited by surveyors when they identify problems. By retraining training and employment records of feeding assistants, a facility will help document its compliance with Federal requirements, and have a record that surveyors may review when they survey the facility.</p>	<p><u>Federal Oversight - State Survey Process</u></p> <p>The survey process will provide the Federal/State oversight of facilities' use of feeding assistants, as it does for other participation requirements. Facilities that request to use or use feeding assistants should be surveyed in the same way as any other facility.</p> <p>No annual inspection of the FATP is planned; however, the State Agency may conduct an onsite visit to inspect the FATP if deemed necessary. The State Agency may withdraw approval for the FATP if the facility fails to comply with Federal and/or State requirements.</p>
<p><u>Registry for Feeding Assistants</u></p> <p>States are not required to place names of Feeding Assistants who have successfully completed a State Approved Feeding Assistant Program on the Nurse Aide Registry.</p> <p>States are not required to establish and maintain a separate registry for feeding assistants.</p> <p>States are not required to check the State Nurse Aide Registry to determine if the individual has worked as a Nurse Aide.</p>	<p><u>Registry for Feeding Assistants</u></p> <p>The State Agency does not plan to establish a separate registry nor place the names of feeding assistants on the Mississippi Nurse Aide Registry.</p> <p>The State Agency does recommend that facilities check the Nurse Aide Registry before hiring any individual to make sure that there are no adverse findings of abuse, neglect, and/or misappropriation of resident property on the nurse aide registry against the individual.</p>

Fingerprinting and Criminal Background History Checks for Paid Feeding Assistants

CMS does not prohibit finger printing and/or criminal background checks not does it require finger printing and/or criminal background checks for feeding assistants..

CSM does require facilities to be thorough in their investigations of the past histories of individuals they are considering hiring. In addition to inquiry of the State nurse aide registry or licensing authorities, the facility should check information from previous and/or current employers and make reasonable efforts to uncover information about any past criminal prosecutions.

Facilities must not hire a potential employee with a history of abuse, if that information is known to the facility. The facility must report knowledge of actions by a court of law against an employee that indicates the employee is unfit for duty. The facility must report alleged violations, conduct an investigation of all alleged violations, report the results to proper authorities, and take necessary corrective actions.

Section 483.13.13(c)(1)(ii) states that facilities must screen potential employees for a history of abuse, neglect or mistreating residents as defined by the applicable requirements at 483.13(c)(1)(ii)(A) and (B). This includes attempting to obtain information from previous employers and/or current employers, and checking with the appropriate licensing boards and registries.

Fingerprinting and Criminal Background History Checks for Paid Feeding Assistants

Facilities must comply with current State laws (see Section 43-11-13, Mississippi Code of 1972) that require fingerprinting and criminal background history checks for any employees hired by a licensing facility on or after July 1, 2003, that performs direct hands-on medical patient care and services who are directly employed by the facility or employed on a contractual basis.

<p><u>Retraining and/or Reciprocity</u></p> <p>There is no requirement that a facility must ask for a copy of an individual's training record before he or she is hired as a feeding assistant. There is no requirement that States must have reciprocity agreements within each state or between states. However, it is not the intent of the regulation that individuals repeat training when moving to another facility. As with any other job applicant, a feeding assistant should indicate where he or she was last employed and a hiring facility may contact the former employer to verify employment and training.</p> <p>CMS did not address continuing education and/or in-service training requirements for Feeding Assistants.</p>	<p><u>Retraining and/or Reciprocity</u></p> <p>Feeding Assistant Training Programs approved by the State are required to issue a training certificate to those students that successfully complete the FATP. <u>Hiring facilities are responsible for making sure that any individual used as a Feeding Assistant in their facility is competent to provide feeding assistant tasks .</u> In other words, the burden of proof is on the facility to ensure that any feeding assistant it uses is properly trained.</p> <p>The State Agency has not established a requirement for annual in-service training for feeding assistants; however facilities are encouraged to develop their own requirements to address additional training needs of feeding assistants on an individual basis.</p>
<p><u>NATCEP Prohibition</u></p> <p>The prohibition that causes a facility to lose the right to train nurse aides when the facility has been cited certain deficiencies as specified in the law does not apply to feeding assistant programs.</p> <p>CMS has given States the flexibility to respond to specific situations and make its own decision whether or not to permit a facility to train and use feeding assistants.</p>	<p><u>NATCEP Prohibition</u></p> <p>The State Agency does not plan to prohibit a facility with a NATCEP restriction from training feeding assistants; however, the State Agency does reserve the right to prohibit a facility from conducting a Feeding Assistant Training Program (FATP) and the right to withdraw approval of a program per State Agency's discretion.</p>

<p><u>Payment/Reimbursement Issues</u></p> <p>The Medicare program pays for skilled nursing facility services to eligible beneficiaries through a prospective payment system that covers all costs (routine, ancillary, and capital) of covered services furnished to residents on a per diem basis. This Medicare SNF PPS per diem payment rate is based, in part, on levels of care and resources required and received by residents. The payment rate covers all care required and received by a resident and does not require that tasks performed by a staff person fit within a direct or indirect care category. Therefore, the Medicare program would not pay a skilled nursing facility any additional funds if the facility chooses to use feeding assistants.</p> <p>Medicaid payment for nursing facilities are established by each State. Therefore, it would be up to individual States to determine whether they would need to change their payment rates for those facilities that use feeding assistants and how the rates would be changed.</p> <p>Cost associated with surveys of long term care facilities are Federally funded, as are cost of State approval of training programs.</p>	<p><u>Payment/Reimbursement Issued</u></p> <p>All reimbursement questions should be directed to the Division of Medicaid.</p>
<p><u>Facility Contract with Feeding Assistants</u></p> <p>With regard to a facility entering into a contract with a feeding assistant that would require that individual to work for a certain period of time, there is nothing in the regulation that would prohibit this practice. This is strictly between the facility and the feeding assistant.</p>	<p><u>Facility Contract with Feeding Assistants</u></p> <p>Same</p>